This listing of claims will replace all prior versions, and listings, of claims in the application:

LISTING OF CLAIMS:

Claim 1 (currently amended): A method for lowering sex hormone levels in an individual,

comprising administering to an individual Use of appropriate doses of an LHRH-antagonist,

peptidic or non-peptidic, wherein that will lower sex hormone levels in said individual are

lowered to a certain extent but not below the castration level of said individual.

Claim 2 (currently amended): A method for lowering sex hormone levels in an individual,

comprising administering Use of appropriate doses of an LHRH-antagonist to an individual

wherein the lowered to lower sex hormone levels in said individual result resulting in

modification of the T-cell population in said individual.

Claim 3 (currently amended): A method for lowering sex hormone levels in an individual,

comprising administering Use of appropriate doses of an LHRH-antagonist to an individual

wherein the lowered to lower sex hormone levels in said individual result resulting in a

modification of the T-cell population in said an individual suffering from a disease that will

respond favourably to such a modification.

Claim 4 (currently amended): A method for lowering sex hormone levels in an individual.

comprising administering Use of appropriate doses of an LHRH-antagonist to an individual

wherein the lowered to lower sex hormone levels in said individual result resulting in a

modification of the T-cell population in an individual suffering from a HIV infection, cancer, an

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auto-immune disease, benign prostatic hyperplasia, endometriosis, asthma, arthritis, dermatitis, multiple sclerosis, Jacob Creuzfeldt-disease, or Alzheimer's disease an for anti-aging treatment.

Claim 5 (currently amended): A method for lowering sex hormone levels in an individual, comprising administering Use of appropriate doses of an LHRH-antagonist to an individual wherein the lowered to lower sex hormone levels in said individual result resulting in a modification of the T-cell population resulting in an enhanced immune response to an antigen.

Claim 6 (currently amended): A method for lowering sex hormone levels in an individual, comprising administering Use of appropriate doses of an LHRH-antagonist to an individual wherein the lowered to lower sex hormone levels in said individual result resulting in a modification of the T-cell population resulting in a decrease of host versus graft reaction.

Claims 7-11 (withdrawn).

Claim 12 (new): The method according to any one of claims 1-6, wherein the LHRH-antagonist is chosen from cetrorelix, teverelix, antide, or abarelix.

Claim 13 (new): The method according to any one of claims 1-6, wherein the LHRH-antagonists is cetrorelix or a pharmaceutically acceptable salt form thereof.

Claim 14 (new): The method according to any one of claims 1-6, wherein the appropriate doses of an LHRH-antagonist are determined from a total dosage range of 5 mg to 120 mg divided in a

period of 1 to 8 weeks according to needs of the individual with repeat of the therapy every 3 to

4 months.

Claim 15 (new): The method according to any one of claims 1-6, wherein the LHRH-antagonist

cetrorelix pamoate is administered in a dosage amount determined from a total dosage range of

30 mg to 120 mg divided in a period of 1 to 4 weeks according to needs, with repeat of the

therapy method every 3 to 4 months as needed.

Claim 16 (new): The method according to any one of claims 1-6, wherein the LHRH-antagonist

cetrorelix acetate is administered in a dosage amount determined from a total dosage range of 5

mg to 80 mg divided in a period of 1 to 8 weeks according to needs, with repeat of the therapy

method every 3 to 4 months as needed.

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